

AUTO CR - LOG SUMMARY #1054323

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that the involved member was responding to a domestic battery in progress call. It is reported that the involved members and responding officers observed the offender [REDACTED] sitting on the stairs and the victim with visible injuries. The involved members and responding officers gave verbal commands for the offender to come downstairs in order to take him into custody. It is reported that the offender stated in an aggressive manner, "No, I'm not going anywhere, this is my house, I'll fight you, I'll kick your ass, I don't care!" The involved members and responding officers approached the offender and he became a resister, when he began flailing his arms and kicking his legs on the stairs case. It is reported that involved member Roan #6097 discharged her taser in order to subdue the offender, but it ended with negative results. It is reported that the offender swung his fist and struck P.O. Conlan #13613 on the chest and the involved member Conlan #13613 performed a drive stun in order to subdue the offender and effect the arrest.	(None Entered)		

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	SCHMEER, PAULA C		[REDACTED]	006 /	LIEUTENANT OF POLICE	F	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
27-MAY-2012 12:30 - 27-MAY-2012 12:30	[REDACTED]	0632	006	303 - SIDEWALK	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Involved Member	CONLAN, JAMES S	13613	[REDACTED]	006 /	POLICE OFFICER	M	WHI		
CPD Employee	Involved Member	ROAN, INOKI D	20876	[REDACTED]	006 /	POLICE OFFICER	F	BLK		
NON-CPD	Victim/Subject	[REDACTED]					M	BLK	[REDACTED]	

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:	P.O. GRIFFITH #14851 OPERATIONS COMMAND NOTIFIED IPRA.		

Incident Category List

Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED AT C.O.P.A.	29-MAY-2012 11:05	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
ADMINISTRATIVELY CLOSED	29-MAY-2012 11:04	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
ADMINISTRATIVELY CLOSED	29-MAY-2012 11:04	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	29-MAY-2012 07:49	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	29-MAY-2012 07:36	HEARD, LORRAINE	POLICE AIDE	716 / 113	
PRELIMINARY	27-MAY-2012 02:16	HEARD, LORRAINE	POLICE AIDE	716 / 113	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					HEARD, LORRAINE	27-MAY-2012 02:16			
1	DOCUMENTS - INTAKE INCIDENT		8	[REDACTED]	N	HEARD, LORRAINE	29-MAY-2012 06:57	APPROVED		
2	DOCUMENTS - INTAKE INCIDENT		2	P.O. Conlon #13613 Performed Drive Stun	N	HEARD, LORRAINE	29-MAY-2012 07:04	APPROVED		
3	DOCUMENTS - INTAKE INCIDENT		3	P.O. Roan #6097 Discharged Taser	N	HEARD, LORRAINE	29-MAY-2012 07:05	APPROVED		
4	DOCUMENTS - INTAKE INCIDENT		1	X00-547548 P.O. Roan #6097	N	HEARD, LORRAINE	27-MAY-2012 02:53	APPROVED		
5	DOCUMENTS - INTAKE INCIDENT		1	X00-554315 P.O. Conlan #13613	N	HEARD, LORRAINE	29-MAY-2012 07:07	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1	X00-554315 P.O. Conlan #13613	N	HEARD, LORRAINE	27-MAY-2012 02:55	DELETED		
	DOCUMENTS - INTAKE INCIDENT		1	X00-547548	N	HEARD, LORRAINE	29-MAY-2012 07:08	DELETED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 27-MAY-2012) - LOG #1054323

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	SCHMEER, PAULA C			006 /	LIEUTENANT OF POLICE	F	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
27-MAY-2012 12:30 - 27-MAY-2012 12:30		0632	006	303 - SIDEWALK	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	27-MAY-2012 14:16	HEARD, LORRAINE	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED AT C.O.P.A.	29-MAY-2012 11:05	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
ADMINISTRATIVELY CLOSED	29-MAY-2012 11:04	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
ADMINISTRATIVELY CLOSED	29-MAY-2012 11:04	WEEDEN, WILLIAM	DEPUTY CHIEF ADMINISTRATOR	113 /	
PENDING ASSIGN TEAM	29-MAY-2012 07:49	ROBERTS, GEORGE	SUPERVISING INVESTIGATOR	113 /	
PENDING SUPERVISOR REVIEW	29-MAY-2012 07:36	HEARD, LORRAINE	POLICE AIDE	716 / 113	
PRELIMINARY	27-MAY-2012 02:16	HEARD, LORRAINE	POLICE AIDE	716 / 113	

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

CB #:
IR #:
YD #:
RD #:
EVENT #:

ARREST REPORTING

OFFENDER	Name	[REDACTED]		Male	[REDACTED]
	Res	[REDACTED]		Black	
		Beat: 632		5' 09"	
	None			160 lbs	
	DOB: [REDACTED]			Brown Eyes	
	AGE: 43 years			Black Hair	
	POB: [REDACTED]			Bald Hair Style	
	ARMED WITH Unarmed			Medium Complexion	
INCIDENT	Arrest Date: 27 May 2012 12:41	TRR Completed? Yes	Total No Arrested: 1	Co-Arrests	Assoc Cases
	Location [REDACTED]	Beat: 632		DCFS Ward ? No	
	290 - Residence		Dependent Children? No		
	Holding Facility: District 006 Lockup				
	Resisted Arrest? Yes				
CHARGES	1	Offense As Cited	720 ILCS 5.0/12-3.2-A-1	Domestic Relate	Victim [REDACTED]
			DOMESTIC BATTERY - BODILY HARM		
			Class A - Type M		
	2	Offense As Cited	720 ILCS 5.0/12-3-A-2		
			BATTERY - MAKE PHYSICAL CONTACT		
			Class A - Type M		
3	Offense As Cited	720 ILCS 5.0/12-2-A-16			
			AGG ASLT/POLICE/SHERIFF EMP		
			Class A - Type M		
4	Offense As Cited	720 ILCS 5.0/12-2-A-16			
			AGG ASLT/POLICE/SHERIFF EMP		
			Class A - Type M		
FELONY REVIEW					



ARREST REPORTING

RECOVERED
NARCOTICS

NO NARCOTICS RECOVERED

WARRANT

NO WARRANT IDENTIFIED



ARREST REPORTING

VICTIM AND COMPLAINANT	
NON-OFFENDER(S)	Name: [REDACTED]
	Res: [REDACTED]
	Beat: 632
	Female Black DOB: [REDACTED] Age: 20 years
Injured? Yes Deceased? No Hospitalized? No Treated and Released? No	



ARREST REPORTING

Injuries: Abrasions

ARREST REPORTING

CUT UNDER LEFT EYE

Comments: Treated On Scene By Engine 82

VICTIM

Name: [REDACTED] Male Injured? No Deceased? No
Empl: [REDACTED] Beat: 621 DOB: Hospitalized? No
Age: Treated and Released? No
Comments: Star #13613

ARRESTEE
VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

EVEN [REDACTED] IN SUMMARY, ABOVE OFFENDER ARRESTED ON SIGNED COMPLAINTS BY [REDACTED] (VICTIM AND COMPLAINANT). VICTIM WAS STANDING OUTSIDE AT ABOVE LOCATION WHEN SHE RELATED TO R/O THAT SUBJECT STRUCK HER WITH A CLOSED HAND(FIST) IN THE LEFT EYE AND FACIAL AREA. VICTIM IS OFFENDERS DAUGHTER. RO OBSERVED A SMALL ABRASION UNDER THE LEFT EYE AND ON HER CHEEK. OFFENDER WAS INSIDE OF THE RESIDENCE SITTING ON THE STAIRS WHEN R/O GAVE VERBAL DIRECTIONS TO COME DOWN THE STAIRS, THAT HE WAS UNDER ARREST. SUBJECT STATED, "NO I'M NOT GOING ANYWHERE, THIS IS MY HOUSE, I'LL FIGHT YOU. I'LL KICK YOUR ASS. I DON'T CARE." WHEN APPROACHED BY R/O TO PLACE HIM IN CUSTODY, SUBJECT STARTED FLAILING HIS ARMS AND KICKING HIS LEGS ON THE STAIRCASE. SUBJECT SWUNG HIS FIST TOWARD RO CONLAN #13613, STRIKING HIM IN THE CHEST. TOOK OFFENDER INTO CUSTODY, READ MIRANDA, TRANSPORTED TO 006TH DIST FOR PROCESSING. NAME CHECK AND INVESTIGATIVE ALERTS: CLEAR. CLEAR ON TRP AND GIP LIST. NOT ON PAROLE. TRR COMPLETED. BT. 620 ON SCENE. OFFENDER HAS PREVIOUS DOMESTIC BATTERY CONVICTION. AREA SOUTH SVU NOTIFIED/ SGT. WASHINGTON #1579.

SEE WC COMMENTS SECTION FOR ADDITIONAL COMMENTS

ARREST REPORTING

COURT INFO	BOND INFO
Desired Court Date: 12 June 2012 Branch: 61-4 555 W HARRISON ST - Room 40 Court Sgt Handle? No Initial Court Date: 28 May 2012 Branch: CBC-1 2600 S CALIFORNIA - Room Docket #:	BOND INFORMATION NOT AVAILABLE

REPORTING PERSONNEL
ATTESTING OFFICER: I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.
Attesting Officer: #13613 CONLAN, J S () 27 MAY 2012 14 52
ARRESTING OFFICER(S):
1st Arresting Officer: #13613 CONLAN, J S () Beat 0632
2nd Arresting Officer: #6097 ROAN, I D () Beat 0631
APPROVING SUPERVISOR:
Approval of Probable Cause : #205 FRANCIS, J W () 27 MAY 2012 15 30

ARREST PROCESSING REPORT

Holding Facility: District 006 Lockup
Received in Lockup: 27 May 2012 17 07
Prints Taken: 27 May 2012 17 11
Palprints Taken: Yes
Photograph Taken: 27 May 2012 17 16
Released from Lockup: 28 May 2012 05 30

Time Last Fed:
Time Called: Phone#:
Cell #: 7
Transport Details : 2PO 0632 27-MAY-2012 12 50

VISUAL CHECK OF ARRESTEE

ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

Presently taking medication? No
(if female)are you pregnant? No
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

27 MAY 2012 17:13 SMITH, Julian A (

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

INTERVIEW LOG

NO INTERVIEWS LOGGED

VISITOR LOG

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

#205 Francis, John

27 MAY 2012 15 31

Subject has a previous conviction

#205 Francis, John W

27 MAY 2012 17 49

Victim does not wish to pursue felony charges

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL

ARRESTEE PROCESSING PERSONNEL:

Searched By:

CAMPBELL, K

Lockup Keeper:

SMITH, J

Assisting Arresting Officer:

#4887

HARGRAVES, D E

Fingerprinted By:

JOHNSON, E

Detective :

#20725

Szymanski, Douglas J

27 MAY 2012 17 49

Beat

0624

5286

APPROVAL PERSONNEL:

Final Approval of Charges :

#895

WALSH, J E

28 MAY 2012 00 02

Beat

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1 DATE OF INCIDENT 27-MAY-2012		TIME 12:41:00		2 ADDRESS OF OCCURRENCE [REDACTED]				3 LOCATION CODE 290		4 BEAT/OCCUR 0632								
	5 POSITION 9161		6 LAST NAME CONLAN		7 FIRST NAME JAMES S		8 STAR NO 13613		9 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10 RACE CODE WHI		11 AGE [REDACTED]		12 HT 601		13 WT 174		
	14 DATE OF APPT 08-JUN-1998				15 EMPLOYEE NO [REDACTED]		16 UNIT & BEAT OF ASSIGNMENT 006 0632		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No						
	20 LAST NAME DAVIS				21 FIRST NAME DARREN				22 M I [REDACTED]		23 SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE BLK		25 D O B [REDACTED]		26 HT 509		27 WT 160
SUBJECT INFORMATION	28 ADDRESS [REDACTED]				29 TELEPHONE NO [REDACTED]		30 WAS SUBJECT ARMED? VERBAL THREAT (ASSAULT), HANDS/FISTS <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No						
	33 WHERE WAS MEDICAL TREATMENT OBTAINED?				34 BY WHOM?		35 CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid												
	36 CHARGES PLACED 720 ILCS 5.0/12-2-A-16, 720 ILCS 5.0/12-2-A-16, 720 ILCS 5.0/12-3-A-2, 720 ILCS				37 CB NO [REDACTED]		IR NO [REDACTED]		DNA <input type="checkbox"/>										
REASON FOR USE OF FORCE (Check all that apply)	38 DNA <input type="checkbox"/>		SUBJECT'S ACTIONS		MEMBER'S RESPONSE		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT ASSAULT		ASSAILANT BATTERY		ASSAILANT DEADLY FORCE				
			DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		MEMBER PRESENCE <input type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input checked="" type="checkbox"/> WRISTLOCK <input checked="" type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input checked="" type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input type="checkbox"/> TASER (Contact Stun) <input checked="" type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER STRUCK OFFICER IN CHIEF		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____				
WEAPON DISCHARGE INCIDENT	39 DNA <input type="checkbox"/>				40 ADDITIONAL INFORMATION														
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER				42 INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		43 LIGHTING CONDITIONS <input checked="" type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44 WEATHER CONDITIONS CLEAR										
	45 MAKE/MANUFACTURER		46 MODEL		47 BARREL LENGTH		48 CALIBER/GAUGE												
	49 TASER DART ID NO		50 WEAPON SERIAL No (Include Letters) X00-547548		51 CHICAGO GUN REG NO		52 IL FIREARM OWNER ID NO		53 HANDGUN CERTIFICATE NO										
CASE INFO.	54 SPECIAL WEAPON CERTIFICATE NO		55 PROPERTY INVENTORY NO		56 TYPE OF AMMUNITION USED		57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1		58 TOTAL NO OF SHOTS MEMBER FIRED										
	59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED		62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)												
	63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO														
	66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT																
SIGNATURES	72		68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)														
	NOTIFICATIONS (OC OR TASER INCIDENT) <input type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report																		
SIGNATURES	73 REPORTING MEMBER (Print Name) CONLAN, JAMES S		STAR/EMPLOYEE NO 13613		SIGNATURE [REDACTED]														
	74 REVIEWING SUPERVISOR (Print Name) GLOVER, KEVIN D		STAR NO 1587		SIGNATURE [REDACTED]		DATE REVIEWED 27-MAY-2012 14:54:59		TIME										

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

Subject refused

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The Reporting Lieutenant has determined that Officer Conlon used his TASER correctly in that he dry stunned the subject after he was TASERED by Officer Roan and the subject was not complying with the officers instructions to place his hands behind his back and stop resisting IPRA Heard #23692

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1054323 OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

SCHMEER, PAULA C

SIGNATURE

[REDACTED]

DATE COMPLETED TIME

27-MAY-2012 15:20:59

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ CASE REPORT

☐ ARREST REPORT

☐ SUPPLEMENTARY REPORT

☒ OFFICER BATTERY REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

☐ I O D REPORT

☐ CR INITIATION REPORT

80 TOTAL TRR's THIS EVENT No

2

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1 DATE OF INCIDENT 27-MAY-2012		TIME 12:41:00		2 ADDRESS OF OCCURRENCE [REDACTED]				3 LOCATION CODE 304		4 BEAT/OCCUR 0632										
	5 POSITION 9161		6 LAST NAME ROAN		7 FIRST NAME INOKI D		8 STAR NO 6097		9 SEX <input type="checkbox"/> 01 M <input checked="" type="checkbox"/> 02 F		10 RACE CODE BLK		11 AGE [REDACTED]		12 HT 505		13 WT 123				
	14 DATE OF APPT 18-DEC-2006		15 EMPLOYEE NO [REDACTED]		16 UNIT & BEAT OF ASSIGNMENT 006 0631		17 DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18 MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19 MEMBER IN UNIFORM? <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No										
SUBJECT INFORMATION	20 LAST NAME DAVIS				21 FIRST NAME DARREN				22 M I <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24 RACE BLK		25 D O B [REDACTED]		26 HT 509		27 WT 140				
	28 ADDRESS [REDACTED]				TELEPHONE NO [REDACTED]				30 WAS SUBJECT ARMED? VERBAL THREAT (ASSAULT) <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31 SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32 SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No						
	33 WHERE WAS MEDICAL TREATMENT OBTAINED?				34 BY WHOM?				35 CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid												
36 CHARGES PLACED 720 ILCS 5.0/12-2-A-16, 720 ILCS 5.0/12-2-A-16, 720 ILCS 5.0/12-3-A-2, 720 ILCS																		37 CB NO [REDACTED]		IR NO <input type="checkbox"/> DNA	
REASON FOR USE OF FORCE (Check all that apply)	38 <input type="checkbox"/> DNA		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT ASSAULT		ASSAILANT BATTERY		ASSAILANT DEADLY FORCE										
	SUBJECT'S ACTIONS		DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input checked="" type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____										
MEMBER'S RESPONSE			MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Laser Targeted) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____										
	39 <input type="checkbox"/> DNA																				
WEAPON DISCHARGE INCIDENT	* OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)				40 ADDITIONAL INFORMATION																
	POSITION		STAR NO		UNIT																
	41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN		44 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER <input type="checkbox"/>		42 INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		43 LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44 WEATHER CONDITIONS OTHER												
	45 MAKE/MANUFACTURER		46 MODEL		47 BARREL LENGTH		48 CALIBER/GAUGE														
49 TASER DART ID NO C31000C4W		50 WEAPON SERIAL No (Include Letters) X00-547548		51 CHICAGO GUN REG NO		52 IL FIREARM OWNER ID NO		53 HANDGUN CERTIFICATE NO													
54 SPECIAL WEAPON CERTIFICATE NO		55 PROPERTY INVENTORY NO		56 TYPE OF AMMUNITION USED		57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1		58 TOTAL NO OF SHOTS MEMBER FIRED													
59 WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED		62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		70 EVENT NO [REDACTED]													
63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO																	
66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT																			
68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)																			
CASE INFO.	72 NOTIFICATIONS (OC OR TASER INCIDENT) <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DESK SGT & W C /DIST OF OCCUR NOTIFICATIONS (FIREARM INCIDENT) <input type="checkbox"/> OEMC <input type="checkbox"/> DESK SGT & W C /DIST OF OCCUR <input type="checkbox"/> OP COMMAND <input type="checkbox"/> DET DIV Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report																				
	73 REPORTING MEMBER (Print Name) ROAN, INOKI D STAR/EMPLOYEE NO 6097 SIGNATURE [REDACTED] 27-MAY-2012 15:34:52 Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below																				
SIGNATURES	74 REVIEWING SUPERVISOR (Print Name) GLOVER, KEVIN D		STAR NO 1587		SIGNATURE [REDACTED]		DATE REVIEWED 27-MAY-2012 15:37:28		TIME		71 R.D. NO [REDACTED]										

WEAPON DISCHARGE INCIDENT	39 <input type="checkbox"/> DNA		41 WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER <input type="checkbox"/> 07 OTHER		42 INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		43 LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44 WEATHER CONDITIONS OTHER		
	45 MAKE/MANUFACTURER				46 MODEL		47 BARREL LENGTH		48 CALIBER/GAUGE		
	49 TASER DART ID NO C31000C4W		50 WEAPON SERIAL No (Include Letters) X00-547548			51 CHICAGO GUN REG NO		52 IL FIREARM OWNER ID NO		53 HANDGUN CERTIFICATE NO	
	54 SPECIAL WEAPON CERTIFICATE NO		55 PROPERTY INVENTORY NO		56 TYPE OF AMMUNITION USED		57 NO OF WEAPONS DISCHARGED BY THIS MEMBER 1		58 TOTAL NO OF SHOTS MEMBER FIRED		
	59 WHO FIRED FIRST SHOT <input type="checkbox"/> 03 OTHER (SPECIFY) <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER		60 WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61 NO OF CATDRIDGES/ SHOT SHELLS RELOADED		62 HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 RT SIDE (WAIST) <input type="checkbox"/> 02 LT SIDE (WAIST)		70. INCIDENT NO		
	63 HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW		64 SPECIFY METHOD/EQUIPMENT USED TO RELOAD				65 DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO				
66 DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)				67 DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT <input type="checkbox"/> 02 05 - 10 FT <input type="checkbox"/> 03 10 - 15 FT <input type="checkbox"/> 04 OVER 15 FT							
68 PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN				69 POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)							

WATCH COMMANDER/OCIC REVIEW

THE WATCH COMMANDER WILL COMPLETE THE REVIEW SECTION FOR 1) ALL INCIDENTS THAT DID NOT INVOLVE THE DISCHARGE OF A FIREARM, 2) FIREARM DISCHARGE INCIDENTS INVOLVING THE DESTRUCTION OF AN ANIMAL OR, 3) ACCIDENTAL DISCHARGE OF A FIREARM NOT RESULTING IN AN INJURY TO ANY PERSON

THE ADS WILL COMPLETE THE REVIEW SECTION FOR ALL INCIDENTS INVOLVING, 1) THE DISCHARGE OF A FIREARM OR IMPACT MUNITIONS BY OR AT A DEPARTMENT MEMBER EXCEPT FOR AN ANIMAL DESTRUCTION OR AN ACCIDENTAL DISCHARGE THAT DOES NOT RESULT IN AN INJURY TO ANY PERSON, 2) MEMBER'S USE OF FORCE BY WHATEVER MEANS THAT RESULTS IN THE DEATH OF A PERSON, 3) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 OR 2

75 SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ UNABLE TO INTERVIEW (Specify Reason)

Subject refused

76 WATCH COMMANDER/OCIC RATIONALE FOR BOX 77 FINDING

The Reporting Lieutenant has determined that Officer Roan used her TASER, according to Dept Directives and the Use of Force Model for handling an Assailant IPRA - Heard #23692 No injuries

77 WATCH COMMANDER/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED

LOG NO /CRNO 1054323 OBTAINED

78 WATCH COMMANDER/OCIC (Print Name)

SCHMEER, PAULA C

SIGNATURE

DATE COMPLETED TIME

27-MAY-2012 16:15:37

79 DISTRIBUTION OF ORIGINAL TRR

A TRR PACKET, INCLUDING THE TRR AND COPIES OF THE BELOW LISTED ATTACHMENTS WILL BE FORWARDED TO THE OFFICE OF PROFESSIONAL STANDARDS

ATTACHMENTS - PHOTOCOPIES OF

☐ SUPPLEMENTARY REPORT

☐ I O D REPORT

80 TOTAL TRR's THIS EVENT No

☐ CASE REPORT

☒ OFFICER BATTERY REPORT

☐ CR INITIATION REPORT

2

☐ ARREST REPORT

☐ TO-FROM-SUBJECT REPORTS FROM DEPARTMENT WITNESS(ES)

Officer Roan #6097



TASER Information

Serial # X00-547548
Model # X26
X26 Software Version 22
Dataport CD Version 17.9
Record Date Range 05/27/2012 - 05/27/2012
Computer Time Zone Central Standard Time
*DST
Using Daylight Savings Time Yes

Downloaded By

Name Richard Bednarek
Dept CPD
Rank Sgt
Windows Version Windows XP
Report Generated 05/27/12 13:23:49
(local)

Recorded Firing Data

Seq	GMT Time	Local Time	Duration	Temp	Battery
0008	05/27/12 17:41:59	05/27/12 12:41:59	5	33	86

Recorded X26 Time Changes

Seq	GMT Time	Local Time	Change Type
0001	Incomplete Time Change Record		
0002	10/22/10 19:19:55	10/22/10 14:19:55	FROM
0003	10/22/10 19:19:55	10/22/10 14:19:55	TO
0004	10/11/11 13:57:33	10/11/11 08:57:33	FROM
0005	10/11/11 13:46:32	10/11/11 08:46:32	TO
0006	01/25/00 05:50:35	01/24/00 23:50:35	FROM
0007	04/08/12 14:39:19	04/08/12 09:39:19	TO

End of Report.



TASER Information

Serial # X00-554315
Model # X26
X26 Software Version 22
Dataport CD Version 17.9
Record Date Range 05/27/2012 - 05/27/2012
Computer Time Zone Central Standard Time
*DST
Using Daylight Savings Time Yes

Downloaded By

Name Richard Bednarek
Dept CPD
Rank Sgt
Windows Version Windows XP
Report Generated 05/27/12 13:21:30
(local)

Recorded Firing Data

Seq	GMT Time	Local Time	Duration	Temp	Battery
0012	05/27/12 17:55:43	05/27/12 12:55:43	7	28	81

Recorded X26 Time Changes

Seq	GMT Time	Local Time	Change Type
0001	Incomplete Time Change Record		
0002	10/26/10 17:38:59	10/26/10 12:38:59	FROM
0003	10/26/10 17:38:59	10/26/10 12:38:59	TO
0004	03/12/11 22:16:25	03/12/11 16:16:25	FROM
0005	03/12/11 22:05:16	03/12/11 16:05:16	TO
0006	05/22/11 01:25:25	05/21/11 20:25:25	FROM
0007	05/22/11 01:22:22	05/21/11 20:22:22	TO
0008	10/27/11 02:37:25	10/26/11 21:37:25	FROM
0009	10/27/11 02:26:18	10/26/11 21:26:18	TO
0010	03/25/00 10:24:35	03/25/00 05:24:35	FROM
0011	01/19/12 14:14:48	01/19/12 08:14:48	TO
0013	05/27/12 18:33:14	05/27/12 13:33:14	FROM
0014	05/27/12 18:20:26	05/27/12 13:20:26	TO

End of Report.



TASER Information

Serial # X00-554315
Model # X26
X26 Software Version 22
Dataport CD Version 17.9
Record Date Range 05/27/2012 - 05/27/2012
Computer Time Zone Central Standard Time
*DST
Using Daylight Savings Time Yes

Downloaded By

Name Richard Bednarek
Dept CPD
Rank Sgt
Windows Version Windows XP
Report Generated 05/27/12 13:21:30
(local)

Recorded Firing Data

Seq	GMT Time	Local Time	Duration	Temp	Battery
0012	05/27/12 17:55:43	05/27/12 12:55:43	7	28	81

Recorded X26 Time Changes

Seq	GMT Time	Local Time	Change Type
0001	Incomplete Time Change Record		
0002	10/26/10 17:38:59	10/26/10 12:38:59	FROM
0003	10/26/10 17:38:59	10/26/10 12:38:59	TO
0004	03/12/11 22:16:25	03/12/11 16:16:25	FROM
0005	03/12/11 22:05:16	03/12/11 16:05:16	TO
0006	05/22/11 01:25:25	05/21/11 20:25:25	FROM
0007	05/22/11 01:22:22	05/21/11 20:22:22	TO
0008	10/27/11 02:37:25	10/26/11 21:37:25	FROM
0009	10/27/11 02:26:18	10/26/11 21:26:18	TO
0010	03/25/00 10:24:35	03/25/00 05:24:35	FROM
0011	01/19/12 14:14:48	01/19/12 08:14:48	TO
0013	05/27/12 18:33:14	05/27/12 13:33:14	FROM
0014	05/27/12 18:20:26	05/27/12 13:20:26	TO

End of Report.

Officer Roan #6097



TASER Information

Serial # X00-547548
Model # X26
X26 Software Version 22
Dataport CD Version 17.9
Record Date Range 05/27/2012 - 05/27/2012
Computer Time Zone Central Standard Time
*DST
Using Daylight Savings Time Yes

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Recorded X26 Time Changes

Seq	GMT Time	Local Time	Change Type
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0002	10/22/10 19:19:55	10/22/10 14:19:55	FROM
0003	10/22/10 19:19:55	10/22/10 14:19:55	TO
0004	10/11/11 13:57:33	10/11/11 08:57:33	FROM
0005	10/11/11 13:46:32	10/11/11 08:46:32	TO
0006	01/25/00 05:50:35	01/24/00 23:50:35	FROM
0007	04/08/12 14:39:19	04/08/12 09:39:19	TO

End of Report.